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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*  
 This application is a CIP of 10/065,023 09/11/2002 PAT 6,724,341 *BJ*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*  
*NONE* *W*

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged	STATE OR COUNTRY PA Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>	SHEETS DRAWING 10	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 5
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TITLE  
 SYSTEM AND METHOD FOR THE MEASUREMENT OF FULL RELATIVE POSITION AND ORIENTATION OF  
 OBJECTS

FILING FEE  RECEIVED 942	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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